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APPLICATION NO.	FILING DATE	FILING DATE		OR	ATTORNEY DOCKET NO.		CONFIRMATION NO.]
10/849,349 05/18/2004		Motomi Matsunaga	Motomi Matsunaga 1232-5416			6734		
ritle of invention	: IMAGE DISPLAY OP	TICAL SYSTEM AND I	MAGE DISPLAY APP	ARATUS				٦
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	DE PREV. PAID ISSU	E FEE TOTA	L FEE(S) DUE	DATE DUE	ل
nonprovisional	МО	\$1440	\$300	20		\$1740	03/20/2008	
EXAMINER ART UNIT		ART UNIT	CLASS-SUBCLASS					
CHAPEL, DEREK S 2872			359-362000					-
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or	type)		Laterry she do	oumant has been filed fo	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSI		(B) RESIDENCE: (CITY and STATE OR COUNTRY)						
CANON KA	BUSHIKI KAISHA	3-30-2, Shimomaruko Ohta-ku, Tokyo, JAPAN						
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	☐ Individual ☐ Co	orporation or otl	ner private gro	up entity Governmen	t -
4a. The following fee(s) Substitute State	are submitted:	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached.						
Advance Order -		The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-4503 (enclose an extra copy of this form).						
5 Change in Entity Sta	tus (from status indicate	Order No. 1232-5416						
Da Annlicant claim	s SMALL ENTITY state	b. Applicant is no longer claiming SMALL ENTITY status. Sec 37 CFR 1.27(g)(2). In the different status of the assigned or other party in the assigned or o						
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Authorized Signature AMLS			Date February 5, 2008					
Typed or printed name Andrea L. Wayda			Registration No. 43,979					
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.								
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